

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Medical Review Division regarding a medical fee dispute between the requestor and the respondent named above.

### **I. DISPUTE**

1. a. Whether there should be reimbursement for date of service 9-7-01.
- b. The request was received on 7-8-02.

### **II. EXHIBITS**

1. Requestor, Exhibit I:
  - a. TWCC 60 and Letter Requesting Dispute Resolution
  - b. TWCC 66a
  - c. EOBs
  - d. Price Alert 8-15-01, Pg. 13
  - e. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
2. Respondent, Exhibit II:
  - a. Response to a Request for Dispute Resolution
  - b. TWCC 66a
  - c. EOBs
  - d. Price Alert 8-15-01, Pg. 13
  - e. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
3. Per Rule 133.307 (g) (3), the Division forwarded a copy of the requestor's 14 day response to the insurance carrier on 8-2-02. Per Rule 133.307 (g) (4) or (5), the carrier representative signed for the copy on 8-5-02. The response from the insurance carrier was received in the Division on 8-20-02. Based on 133.307 (i) the insurance carrier's response is timely.
4. Notice of Letter Requesting Additional Information is reflected as Exhibit III of the Commission's case file.

### **III. PARTIES' POSITIONS**

1. Requestor: Letter dated 7-25-02:

“We have submitted a claim to the Carrier for date of service 09-07-01 for the medication Celebrex 200 mg #30 in the amount of \$87.06...the following formula shall be utilized for brand name medications.  $AWP \times \text{number of units} \times 1.09 + \$4.00 = \text{MAR}$ . In this

case the patient received 30 pills the AWP is  $251.69 \times .30 = 75.51 \times 1.09 = 82.31 + \$4.00 = \$86.31$ .”

- Respondent: Letter dated 8-20-02:  
 “...Respondent prays the Medical Review Division decline to order reimbursement for the services made the basis of this dispute.”

**IV. FINDINGS**

- Based on Commission Rule 133.307(d) (1) (2), the only date of service eligible for review is 7-25-02.
- The Carrier has denied the dispute service as reflected on the EOB as, “F1 –Reduction According to Fee Guideline. Charge exceeds the scheduled maximum allowance per the Medical Fee Guideline”; “O Upon review of your request for a reconsideration, no additional benefits is recommended at this time”.
- The following table identifies the disputed services and Medical Review Division's rationale:

DOS	CPT or Revenue CODE	BILLED	PAID	EOB Denial Code(s)	MARS	REFERENCE	RATIONALE:
9-7-01	Celebrex 200 mg #30	\$87.06	\$-0-	F1, O	No MAR	MFG: Pharmaceutical Fee Guideline	<p>The Carrier has denied the disputed service as “F1 and O”.</p> <p>There is no set MAR value for Celebrex reflected in the Medical Fee Guideline. Fee computation for brand name pharmaceuticals utilizes the following formula (AWP)/unit x number units x 1.09 = \$4.00 = MAR. The AWP is determined utilizing Price Alert that is in effect on the date of service.</p> <p>Based on the Price Alert, the provider has billed the correct amount. The billed amount is in accordance with the billing requirements as reflected above.</p> <p>Therefore, reimbursement is recommended in the amount of \$86.31.</p>
<b>Totals</b>		\$87.06	\$-0-				<p>The Requestor is entitled to reimbursement in the amount of <b>\$86.31</b>. The Commission cannot order more than listed in the “Amount in Dispute” section of the Table of Disputed Services.</p>

**V. ORDER**

Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Medical Review Division hereby ORDERS the Respondent to remit **\$86.31** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this order.

This Order is hereby issued this 4<sup>th</sup> day of December 2002.

Lesa Lenart  
Medical Dispute Resolution Officer  
Medical Review Division  
LL/ll